

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 1A: Student Borrower Data Section

Student/Graduate Data	Cumulative (includes current year)	Current Year
1. Number of Loans for the Nursing - Associate discipline	0	0
2. Total Dollar Amount of Loans Awarded for the Nursing - Associate discipline	0	0
3. Total Full-time enrollment for the Nursing - Associate discipline for the academic year (both non-NSL and NSL recipients)		0
4. Total number of Defaulted Loans for the Nursing - Associate discipline	0	0
5. Total Original Defaulted Principal Loaned for Nursing - Associate discipline	0	0
6a. Total Number of Students who dropped out this year for the Nursing - Associate discipline		0
6b. Of the number above, how many of them were NSL student borrowers		0
7a. Total Number of NSL Borrowers for the Nursing - Associate discipline	0	0
7b. Of the number of NSL borrowers for the Nursing - Associate discipline above, number of Active and Non Retired/Defaulted Borrowers	0	
8. Total Number of NSL students including those who graduated during this reporting period for the Nursing - Associate discipline (Age and Gender details)	0	0
9. Total Graduates (NSL - Nursing - Associate Discipline)	0	0
10. Number of NSL loan students including those who graduated during this reporting period that indicate an intention to serve in a medically underserved community		0
11. Number of NSL students including those that graduated during this reporting period that indicate an intention to practice in primary care		0
12. Number of NSL students and graduates during this reporting period from rural backgrounds		0
Current Year Graduate Special Data	Number of Graduates	
13. Total number of full time graduates (NSL loan recipients and Non-NSL) at your school during the current reporting period	0	
13a. Of the total number in question 13, how many are URM graduates	0	
13b. Of the total number in question 13, how many are non-URM graduates	0	
14. Total number of full time NSL graduates during the current reporting period who indicate intent to practice in a rural area	0	
Prior Year Graduate Special Data for 2013 - 2014 Academic Year	Number of Graduates	
15a. Total Number of NSL - Nursing - Associate Loan Recipients who graduated in academic year 2013 - 2014	0	
15b. Of the Total Graduates reported in question 15a, the Number of Full-Time NSL - Nursing - Associate Graduates in academic year 2013 - 2014 serving in Medically Underserved Communities	0	
15c. Of the Total Graduates reported in question 15a, the Number of Full-Time NSL - Nursing - Associate Graduates in academic year 2013 - 2014 serving in Primary Care	0	
15d. Of the Total Graduates in question 15a, the Number of Full-Time NSL - Nursing - Associate Graduates in academic year 2013 - 2014 who entered the field for which they received their degree	0	
15e. Of the Total Graduates reported in question 15a, the Number of NSL - Nursing - Associate Graduates in academic year 2013 - 2014 who entered service in a rural area	0	

OMB Number: 0915-0044

Expiration Date: 01/31/2018

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 1B: Student Race/Ethnicity Data Section

Hispanic or Latino Students By Race	Enrollment of Discipline (A)	New Student Recipients (B)	Recipients Other Than New Who Did Not Graduate (C)	Recipients Other Than New Who Graduated (D)	Total Recipients (B+C+D)
A. American Indian or Alaska Native	0	0	0	0	0
B. Asian	0	0	0	0	0
C. Black or African-American	0	0	0	0	0
D. Native Hawaiian or Other Pacific Islander	0	0	0	0	0
E. White	0	0	0	0	0
F. More than one race	0	0	0	0	0
G. Race Not Reported	0	0	0	0	0
Total (A + B + C + D + E + F + G)	0	0	0	0	0
Non-Hispanic or Non-Latino Students By Race	Enrollment of Discipline (A)	New Student Recipients (B)	Recipients Other Than New Who Did Not Graduate (C)	Recipients Other Than New Who Graduated (D)	Total Recipients (B+C+D)
A. American Indian or Alaska Native	0	0	0	0	0
B. Asian	0	0	0	0	0
C. Black or African-American	0	0	0	0	0
D. Native Hawaiian or Other Pacific Islander	0	0	0	0	0
E. White	0	0	0	0	0
F. More than one race	0	0	0	0	0
G. Race Not Reported	0	0	0	0	0
Total (A + B + C + D + E + F + G)	0	0	0	0	0

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 2: Program Accounts Section

Program Accounts Section		
A. Federal Funds Awarded	Cumulative (\$) (includes current year)	Current Year (\$)
Federal Funds Awarded	0	0
B. Cash Balance - Start of Report Period		Current Year (\$)
Cash Balance – Start of Report Period		0
C. Cash Receipts	Cumulative (\$) (includes current year)	Current Year (\$)
1. Federal Funds Received/Receivable	0	0
2. Institutional Contributions Deposited	0	0
3. Transferred from Scholarship Fund	0	0
4. Loan Principal Collected	0	0
5. Interest Income Collected on Loans	0	0
6. Penalty Charges Collected on Loans	0	0
7. Investment Income	0	0
8. Institutional Repayments of Bad Debts, Principal	0	0
9. Institutional Repayments of Bad Debts, Interest	0	0
10. Institutional Repayments of Bad Debts, Penalty charges	0	0
C. Total	0	0
D. Cash Disbursements	Cumulative (\$) (includes current year)	Current Year (\$)
1. Loaned to Students	0	0
2. Transferred to Scholarship Fund	0	0
3. Repayments to Federal Government, Principal	0	0
4. Repayments to Federal Government, Interest	0	0
5. Repayments to Federal Government, Other Income	0	0
6. Repayments to Institution, Principal	0	0
7. Repayments to Institution, Interest	0	0
8. Repayments to Institution, Other Income	0	0
9. Collection Agent Costs, Principal	0	0
10. Collection Agent Costs, Interest	0	0
11. Litigation Costs, Principal	0	0
12. Litigation Costs, Interest	0	0
13. Credit Bureau Fees	0	0
14. Other Costs	0	0
D. Total	0	0
E. Cash Balance - End of Report Period		Current Year (\$)
Cash Balance – End of Report Period		0

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 3: Program Accounts Section

Program Accounts Section								
F.1. Loan Cancellations to Borrowers – Professional Practice								
Description	Cumulative (Includes Current Year)			Current Year				
	Number of Borrowers	Principal (\$)	Interest (\$)	Number of Borrowers	Principal (\$)	Interest (\$)		
a. HP Practice – Shortage (10%)	N/A			N/A				
b. HP Practice – Rural Shortage (15%)	N/A			N/A				
F.1. Total								
F.2. Loan Cancellations to Borrowers – Nursing Employment								
Description	Cumulative (Includes Current Year)			Current Year				
	Number of Borrowers	Principal (\$)	Interest (\$)	Number of Borrowers	Principal (\$)	Interest (\$)		
a. Nursing Employment (10%)	0	0	0	N/A				
b. Nursing Employment (15%)	0	0	0	N/A				
c. Nursing Employment (20%)	0	0	0	N/A				
d. Nursing Employment (15%) on or after 03/23/2010		0	0	3	0	0		
e. Nursing Employment (20%) on or after 03/23/2010		0	0	0	0	0		
f. Nursing Employment (Other) on or after 03/23/2010		0	0	0	0	0		
F.2. Total	0	0	0	3	0	0		
F.3. Loan Cancellations to Borrowers – Death								
Description	Cumulative (Includes Current Year)			Current Year				
	Number of Borrowers	Principal (\$)	Interest (\$)	Number of Borrowers	Principal (\$)	Interest (\$)		
a. On Loans made on or after 10/22/85	0	0	0	0	0	0		
b. On Loans except those made after F.3.a	0	0	0	0	0	0		
F.3. Total	0	0	0	0	0	0		
F.4. Loan Cancellations to Borrowers – Permanent & Total Disability Approved by HHS								
Description	Cumulative (Includes Current Year)			Current Year				
	Number of Borrowers	Principal (\$)	Interest (\$)	Number of Borrowers	Principal (\$)	Interest (\$)		
a. On Loans made on or after 10/22/85	0	0	0	0	0	0		
b. On Loans except those reported in F.4.a.	0	0	0	0	0	0		
F.4. Total	0	0	0	0	0	0		
G. Bad Debts Approved For Write-Off By HHS								
Description	Cumulative (Includes Current Year)				Current Year			
	Number of Borrowers	Principal (\$)	Interest (\$)	Penalty Charges (\$)	Number of Borrowers	Principal (\$)	Interest (\$)	Penalty Charges (\$)
Total Approved	0	0	0	0	0	0	0	0

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 4: Excess Cash Worksheet Section

Excess Cash Worksheet Section	
Description	Amount (\$)
A. General Ledger Cash Balance as of Date	0
B. Actual Collections for 7/1/2014 - 6/30/2015	
1. Principal	0
2. Interest	0
3. Investment Income and Penalty Charges	0
4. Institutional Repayments of Bad Debts (Principal, Interest & Penalty Charges)	0
C. Federal Funds Received/Receivable 7/1/2014 - 6/30/2015	
1. Federal Funds Received/Receivable	0
D. Institutional Contribution for 7/1/2014 - 6/30/2015	
1. Institutional Contribution	0
E. Projected Collections for 7/1/2015 - 6/30/2016	
1. Principal	0
2. Interest	0
3. Investment Income and Penalty Charges	0
F. Projected Funds Available as of 6/30/2016	
1. Projected Funds Available (A+B+C+D+E)	0
G. Actual Expenditures for 7/1/2014 - 6/30/2015	
1. Loans to Students	0
2. Costs (Collection, Litigation, Credit Bureau and Other)	0
3. Repayments to Federal Government and Institution (Principal, Interest and Other Income)	0
H. Projected Expenditures for 7/1/2015 - 6/30/2016	
1. Loans to Students	0
2. Costs (Collection, Litigation and Credit Bureau)	0
I. Projected Expenditures as of 6/30/2016	
1. Projected Expenditures (G+H)	0
J. Projected Cash Balance as of 6/30/2016	
1. Projected Cash Balance (F-I)	0
K. Less Projected Expenditures for 7/1/2016 - 6/30/2018	
1. Less Projected Expenditures	0
L. Excess Cash	
1. Excess Cash (J - K)	0
M. General Ledger Ending Cash Balance as of 6/30/2015	

1. General Ledger Ending Cash Balance

127,568

OMB Number: 0915-0044
Expiration Date: 01/31/2018

Sample

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 5: Program Accounts Section

Program Accounts Section

H. Default Rate (Pre-populated. No entry required)

1. Default Rate (%)	0
---------------------	---

For Active Schools

2. Excess cash(\$) from report page 4 that was or will be returned to PMS	0
---	---

3. Excess cash(\$) from report page 4 that was or will be returned to the Division of Financial Operations	0
--	---

For Closing Schools

4. Amount of cash(\$) determined to be due to the federal government and remitted separately to the division of Financial Operations	0
--	---

I. Checklist/Questions

1. What is the total amount (\$) of interest that is due?	0
---	---

2. Does your institution provide for a biennial audit of program or school funds by a qualifying independent auditor? **Yes**

Yes (provide the detail below) No (proceed to the next question)

Audits	MM	YYYY
a. Period of last audit - Start Date	0	0
b. Period of last audit - End Date	0	0
c. Date audit submitted to Regional Audit Agency	0	0

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Page 6: Program Accounts Section

Program Accounts Section											
1. Fully Retired											
Description	Number of Borrowers (1)	Principal Loaned (\$) (2)	Principal Repaid (\$) (0)	Principal Cancelled		Principal Delinquent (\$) (5)	Principal Uncollectible Not Past Due (\$) (6)	Principal Outstanding but Not Due (\$) (7)	Principal Written Off (\$) (8)	Capitalized Interest (\$) (9)	Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$) (10)
				Employment/Prof Pract (\$) (3)	Death/Disability (\$) (4)						
A. Repayment/Cancellation	0	0	0	0	0						0
B. Cancellation/Death	0	0	0	0	0						0
C. Cancellation/Disability	0	0	0	0	0						0
D. Discharged in Bankruptcy	0	0	0	0	0		0				0
E. HHS Approved Write-Off	0	0	0	0	0				0		0
F. Uncollectible per P.L. 107-205	0	0	0	0	0				0		0
1. Total (Sum of Row A through F)	0	0	0	0	0		0		0		0
2. Current											
Description	Number of Borrowers (1)	Principal Loaned (\$) (2)	Principal Repaid (\$) (3)	Principal Cancelled		Principal Delinquent (\$) (6)	Principal Uncollectible Not Past Due (\$) (7)	Principal Outstanding but Not Due (\$) (8)	Principal Written Off (\$) (9)	Capitalized Interest (\$) (10)	Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$) (11)
				Employment/Prof Pract (\$) (4)	Death/Disability (\$) (5)						
A. Student Status	0	0	0	0	0			0			0
B. Grace Period	0	0	0	0	0			0			0
C. Deferment Status	0	0	0	0	0			0			0
D. Postponement/Cancellation	0	0	0	0	0			0			0
E. Repayment - Not Past Due	0	0	0	0	0			0			0
F. Past Due 1-119 Days	0	0	0	0	0	0		0			0
2. Total (Sum of Row A through F)	0	0	0	0	0	0		0			0
3. In Bankruptcy											
Description	Number of Borrowers (1)	Principal Loaned (\$) (2)	Principal Repaid (\$) (3)	Principal Cancelled		Principal Delinquent (\$) (6)	Principal Uncollectible Not Past Due (\$) (7)	Principal Outstanding but Not Due (\$) (8)	Principal Written Off (\$) (9)	Capitalized Interest (\$) (10)	Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$) (11)
				Employment/Prof Pract (\$) (4)	Death/Disability (\$) (5)						
A. Pending Discharge/Wage Earners Agreement	0	0	0	0	0	0	0	0			0

4. In Default											
Description	Number of Borrowers (1)	Principal Loaned (\$) (2)	Principal Repaid (\$) (3)	Principal Cancelled		Principal Delinquent (\$) (6)	Principal Uncollectible Not Past Due (\$) (7)	Principal Outstanding but Not Due (\$) (8)	Principal Written Off (\$) (9)	Capitalized Interest (\$) (10)	Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$)
				Employment/Prof Pract (\$) (4)	Death/Disability (\$) (5)						
A. 120 Days and Over	0	0	0	0		0	0	0			0
5. Forbearance											
Description	Number of Borrowers (1)	Principal Loaned (\$) (2)	Principal Repaid (\$) (3)	Principal Cancelled		Principal Delinquent (\$) (6)	Principal Uncollectible Not Past Due (\$) (7)	Principal Outstanding but Not Due (\$) (8)	Principal Written Off (\$) (9)	Capitalized Interest (\$) (10)	Reconciling Difference (Column 2 + Column 10 - Sum of Columns 3 through 9) (\$)
				Employment/Prof Pract (\$) (4)	Death/Disability (\$) (5)						
A. Forbearance	0	0	0	0		0	0	0			0
Total	0	0	0	0		0	0	0			0

OMB Number: 0915-0044
Expiration Date: 01/31/2018

Sample

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration BUREAU OF HEALTH WORKFORCE Loans Annual Operating Report	FOR HRSA USE ONLY		
	Institution:		Program: NSL - Associate Nursing
	Submission Tracking #:	Grant Number:	Reporting Period: 7/1/2014 - 6/30/2015

Comments and Certification

Role	Name	Phone	Email
Primary Point of Contact			
Alternate Point of Contact			

Certification

I am authorized to submit this report to HRSA.

Authorized Certifying Official	
Date Report Submitted	

Future Support Required: Yes

Comments

Exceptions

Section	Message	Status
Page 4	-	Reviewed-Explained
Page 4		Reviewed-Explained

OMB Number: 0915-0044
 Expiration Date: 01/31/2018

Sample